

<b>TRANSMITTAL SLIP</b>		DATE 20 Apr. 69
TO: <b>D/OSR</b>		
ROOM NO. <b>3G01</b>	BUILDING <b>Headquarters</b>	
REMARKS:  		
FROM: <b>D/Ch/SR/PA</b>		
ROOM NO. <b>3F29</b>	BUILDING <b>Hdqrs.</b>	

FORM NO. 241  
1 FEB 55REPLACES FORM 36-8  
WHICH MAY BE USED.

(47)

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